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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	09/438184
Filing Date	11/1/1999
First Named Inventor	Ron McCabe / Miralink Corporation
Art Unit	2163
Examiner Name	Dung C. Dinh
Attorney Docket Number	1735.2.2 / 22995.US

**To:** Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.

the attorneys/agents (with registration numbers) listed on the attached paper(s), or

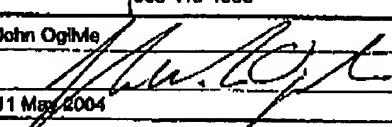
the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

Client failure to communicate, failure to pay, done pursuant to withdrawal agreement with client.  
The reasons for this request are:
**CORRESPONDENCE ADDRESS**

- The correspondence address is NOT affected by this withdrawal.
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**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Ron McCabe / Miralink Corporation		
Address	28 SW 1st Ave, Ste 410		
Address			
City	Portland	State	Oregon
Country	USA		
Telephone	503-419-1660		Fax 503-419-1649
Name	John Ogle		
Signature		Registration No.	37987
Date	11 May 2004	Telephone No.	801-706-2546

NOTE: Withdrawals effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DATE: MAY 11, 2004

PAGE 1 OF: 4

TO: COMMISSIONER FOR PATENTS  
FROM: JOHN W. L. OGILVIE  
OUR DOCKET NUMBER:  
SUBJECT:

FACSIMILE NUMBER: (703)872-9306  
TRANSMITTED BY: SHEILA

RON McCABE/MIRALINK CORPORATION  
APPLICATION No. 09/438,184, 09/873,977, AND 09/925,938  
REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF  
CORRESPONDENCE ADDRESS

IF YOU DO NOT RECEIVE THE COMPLETE DOCUMENT, PLEASE NOTIFY THE SENDER AS  
SOON AS POSSIBLE.

REMARKS:

ATTACHED ARE 3 REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF  
CORRESPONDENCE ADDRESS FORMS FOR THE ABOVE MENTIONED APPLICATION NOS.



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